1420593

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL				
OMB Number:	3235-0076			
Expires:				
Estimated averag	je burden			
hours per respon-	se16.00			

SEC USE ONLY						
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DATE RI	ECEIVED					
- 1	1					

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Class A Preferred Unit Offering
The same and the s
Type of Filing: New Filing Amendment Rule 504 Rule 505 Rule 506 Section 4(6) GLOB Section 4(6) GL
A PASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
Sigma International General Medical Apparatus, L.L.C. 186
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
711 Park Ave., Medina, NY 14103 585-798-3901
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)
Brief Description of Business
manufacturer and sale of medical devices
Type of Business Organization 07085195
corporation limited partnership, already formed X other (please specify): business trust limited partnership, to be formed 3 i m i ted liability company
Actual or Estimated Date of Incorporation or Organization: Month Year [1] [0] [8] [X] Actual [Estimated Estima
Lucidistica of Incorporation or Organization: (Bater tun-letter II S. Portal Service abbreviation for State:
CN for Canada; FN for other foreign jurisdiction) NE DEC 1 0 2007
GENERAL INSTRUCTIONS THOMSON
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 ELACTOR 277d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.
ATTENTION— Conversely failure to file the
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a today position.

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2. Enter the information requested for the following:	•
 Each promoter of the issuer, if the issuer has been organized within the past five years; 	
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% 	% or more of a class of equity securities of the issuer.
 Each executive officer and director of corporate issuers and of corporate general and managing 	partners of partnership issuers; and
 Each general and managing partner of partnership issuers. 	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, if individual)	
,	·
Hungerford, Roger Business or Residence Address (Number and Street, City, State, Zip Code)	
711 Park Ave., Medina, NY 14103	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Zucker, Jerry	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o The Intertech Group, P.O. Box 5205, N.Charlest	ton, SC 29405
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, a	as necessary)

		Sales at 14	janti Lijotat alakan ing s	restant at	of sugar	(1) (1.4)	والمهارة لأوالي م		Con	4.05	77.5		
1				Ab			42. 4.		41.1 601		<u> </u>	Yes	No
1.	Has the	issuer sold	, or does the									D	
	Answer also in Appendix, Column 2, if filing under ULOE.							s 10	,000				
2.	2. What is the minimum investment that will be accepted from any individual?							Yes	No				
3.			ermit joint										M
4.	Enter the	e informati	on requeste	d for eacl	person w	ho has bee	n or will b	e paid or g	given, direc	tly or indi	rectly, any	i	
	If a perso	on to be list	lar remuner ed is an asse	ociated per	rson or age:	nt of a brok	er or deale:	r registered	with the S	EC and/or	with a state	1	
	or states,	list the na	me of the br	oker or de	aler. If mo	re than five	(5) person	s to be liste	ed are asso	ciated pers	ons of such	l	
£I			irst, if indi			on for ulac	DIOKEI OI C			-			 -
rui	i Maine (r	ASE HAIRE I	nst it mar	viduai)									
Bus	siness or I	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
Nai	me of Ass	ociated Br	oker or Dea	ler									
Sta											••		
	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)										☐ All	l States	
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
	ĪL.	N.	1A	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	(HII)	N	NM	NY	NC	ND	OH	OK.	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	ŴΫ	PR
Ful	l Name (I	ast name i	first, if indi	vidual)				· -			•		
Bu	siness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						<u> </u>
Na	me of Ass	ociated Br	oker or Dea	ler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers		*				
	(Check	"All States	" or check i	individual	States)			***************************************				☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT]	DE	[DC]	FL	[GA]	HI	a
	<u>L</u>	IN	IA.	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK.	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	ll Name (I	Last name	first, if Indi	vidual)					 -	.,			·
Business or Residence Address (Number and Street, City, State, Zip Code)													
Na	me of Ass	ociated Br	oker or Dea	aler									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
		-	or check								*************	☐ A1	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	ĪŊ	IA	KS	KY	LA	ME	MD	MA	M	MN	MS	MO
	MT	NE	[NV]	NH Provi	[אַד] [ע	MM) UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA
	RI	(SC)	SD	TN	IX	لنب	للبيا	لكت	11.41	1,7 4		لغبتنا	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and		
	aiready exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	e Sold
	Debt	<u> </u>	\$
	Equity	10,000,52	2 \$10.000.52 2
	☐ Common 😿 Preferred		
	Convertible Securities (including warrants)	S	_ \$
	Partnership Interests	\$	\$
	Other (Specify)	<u> </u>	<u> </u>
	Total	10,000,52	2 \$10,000,52 2
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors.		
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.		_ •
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	,	\$
	Regulation A		_ s
	Rule 504		
	Total		\$ <u>0.00</u>
ļ	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fccs		
	Printing and Engraving Costs		
	Legal Fees		\$ 200.000
	Accounting Fees		s
	Engineering Fees	-	
	Sales Commissions (specify finders' fees separately)	_] \$
	Other Expenses (identify)	-]
	Total	_	s 200,000

5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. Payments to Officers, Directors, & Payments to Officers, Directors, Carlot of the state of the payments to Officers of the state of real estate. Purchase of real estate		b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qu proceeds to the issuer."	estion 4.a. This difference is the "adjusted gross		\$ 9,800,522
Payments to Officers, Directors, & Payments to Officers, Directors, & Affiliates Salaries and fees \$ \$ \$ \$ \$ \$ \$ \$ \$	5.	each of the purposes shown. If the amount for any peheck the box to the left of the estimate. The total of the	ourpose is not known, furnish an estimate and e payments listed must equal the adjusted gross		
Purchase, rental or leasing and installation of machinery and equipment. Construction or leasing of plant buildings and facilities			\	Officers, Directors, &	•
Purchase, rental or leasing and installation of machinery and equipment		Salaries and fees	[] \$. 🗆 s
and equipment		Purchase of real estate	[] \$. 🗀 s
Construction or leasing of plant buildings and facilities		Purchase, rental or leasing and installation of machinand equipment	nery [¬\$. is
offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness Working capital Other (specify): Purchase of common units S Column Totals Total Payments Listed (column totals added) The issuer has duly caused this notice to be signed by the understanced duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, he information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Signan International General Medical Apparatus, I.J.C. Title of Signer (Print or Type) Title of Signer (Print or Type) Title of Signer (Print or Type)					
Repayment of indebtedness \$ \$ \$ \$ \$ \$ \$ \$ \$		offering that may be used in exchange for the assets	or securities of another		
Working capital S S S S S S S S S S S S S S S S S S S					
Other (specify): Purchase of common units S 9,800,522 Column Totals S 9,800,522 Total Payments Listed (column totals added) S 9,800,522 The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Jule 502. Substitutes and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Jule 502. Substitutes Signature Signature Signature November 30, 2007 Title of Signer (Print or Type) Title of Signer (Print or Type)		Repayment of indebtedness]2	. 🗆 \$
Column Totals System 1. State (column totals added) System 1. State (column totals added) System 2. State (c					
Column Totals				」₃	<u>X</u> 9
Total Payments Listed (column totals added) IFFEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Signature Signature Date November 30, 2007 Title of Signer (Print or Type)			·· · · · · · · · · · · · · · · · · · ·]\$	s
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Signature Signature Date November 30, 2007 Title of Signer (Print or Type)		Column Totals]\$	図\$ <u>9,800,52</u> 2
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Signature Date November 30, 2007 Title of Signer (Print or Type)		Total Payments Listed (column totals added)		[X] S <u>9</u>	<u>,800,52</u> 2
signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Signature Signature Signature November 30, 2007 Title of Signer (Print or Type)	t,	2015年中国第二届第二十两个1700年2015年 1015年中国第二十四十四十四十四十四十四十四十四十四十四十四十四十四十四十四十四十四十四十四	IL PEDERAL SIGNATURE	"特别"	
Sigman International General Medical Apparatus, L.L.C. November 30, 2007 Title of Signer (Print or Type)	igr he	nature constitutes an undertaking by the issuer to furnis information furnished by the issuer to any non-accred	h to the U.S. Securities and Exchange Commiss ited investor pursuant to paragraph (b)(2) of F	tion, upon writte ule 502.	
Name of Signer (Print or Type) Title of Signer (Print or Type)	Si	qman International General	Ignature		30. 2007
Roger L. Hungerford Manager			itle of Signer (Print or Type)		
	Ro	ger L. Hungerford	Manager		

END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)